



05-04-05  
UNITED STATES PATENT AND TRADEMARK OFFICE

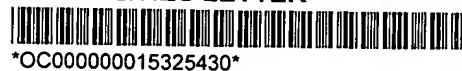
UNITED STATES DEPARTMENT OF COMMERCE  
United States Patent and Trademark Office  
Address: COMMISSIONER FOR PATENTS  
P.O. Box 1450  
Alexandria, Virginia 22313-1450  
www.uspto.gov

| APPLICATION NUMBER | FILING OR 371 (c) DATE | FIRST NAMED APPLICANT  | ATTORNEY DOCKET NUMBER |
|--------------------|------------------------|------------------------|------------------------|
| 10/635,818         | 08/05/2003             | John Joseph Harrington | ATX-007CP4DV13CN       |

00959  
LAHIVE & COCKFIELD, LLP.  
28 STATE STREET  
BOSTON, MA 02109



CONFIRMATION NO. 1411  
FORMALITIES LETTER



\*OC000000015325430\*

Date Mailed: 03/03/2005

## NOTICE TO FILE MISSING PARTS OF NONPROVISIONAL APPLICATION

05/05/2005 HWOLDGE1 00000083 120080 10635818

FILED UNDER 37 CFR 1.53(b)

01 FC:2051 65.00 DA

*Filing Date Granted*

### Items Required To Avoid Abandonment:

An application number and filing date have been accorded to this application. The item(s) indicated below, however, are missing. Applicant is given **TWO MONTHS** from the date of this Notice within which to file all required items and pay any fees required below to avoid abandonment. Extensions of time may be obtained by filing a petition accompanied by the extension fee under the provisions of 37 CFR 1.136(a).

- The oath or declaration is missing.  
*A properly signed oath or declaration in compliance with 37 CFR 1.63, identifying the application by the above Application Number and Filing Date, is required.*
- To avoid abandonment, a late filing fee or oath or declaration surcharge as set forth in 37 CFR 1.16(e) of \$65 for a small entity in compliance with 37 CFR 1.27, must be submitted with the missing items identified in this letter.

The application is informal since it does not comply with the regulations for the reason(s) indicated below.

The required item(s) identified below must be timely submitted to avoid abandonment:

- A replacement abstract not exceeding 150 words in length and commencing on a separate sheet in compliance with 37 CFR 1.72(b) and 37 CFR 1.121 is required.

### SUMMARY OF FEES DUE:

Total additional fee(s) required for this application is **\$65** for a Small Entity

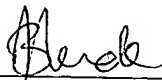
- **\$65** Late oath or declaration Surcharge.

Replies should be mailed to: Mail Stop Missing Parts  
Commissioner for Patents

P.O. Box 1450  
Alexandria VA 22313-1450

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*A copy of this notice MUST be returned with the reply.*

A handwritten signature in cursive script, appearing to read "Hersh", is written over a horizontal line.

Customer Service Center

Initial Patent Examination Division (703) 308-1202

PART 2 - COPY TO BE RETURNED WITH RESPONSE



## UNITED STATES PATENT AND TRADEMARK OFFICE

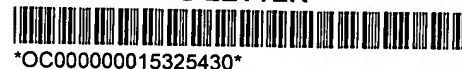
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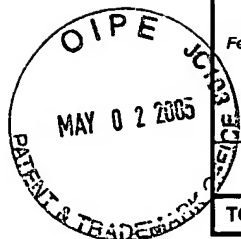
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*A copy of this notice **MUST** be returned with the reply.*

A handwritten signature in cursive script, appearing to read "H. de", is written over a horizontal line.

Customer Service Center  
Initial Patent Examination Division (703) 308-1202

PART 3 - OFFICE COPY



|   |  |                          |                        |
|---|--|--------------------------|------------------------|
| <b>Effective on 12/08/2004.</b><br><b>Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).</b><br><b>FEE TRANSMITTAL</b><br><b>For FY 2005</b> |  | <b>Complete if Known</b> |                        |
| <input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27   |  | Application Number       | 10/635818              |
| <b>TOTAL AMOUNT OF PAYMENT</b>  |  | Filing Date              | August 5, 2003         |
| (\$)  |  | First Named Inventor     | John Joseph HARRINGTON |
| 65.00   |  | Examiner Name            | Not Yet Assigned       |
|   |  | Art Unit                 | 1645                   |
|   |  | Attorney Docket No.      | ATX-007CP4DV13CN       |

**METHOD OF PAYMENT** (check all that apply)

☐ Check ☐ Credit Card ☐ Money Order ☐ None ☐ Other (please identify): \_\_\_\_\_

☒ Deposit Account Deposit Account Number: 12-0080 Deposit Account Name: Lahive & Cockfield, LLP

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

☒ Charge fee(s) indicated below ☐ Charge fee(s) indicated below, **except for the filing fee**

☒ Charge any additional fee(s) or underpayment of fee(s) under 37 CFR 1.16 and 1.17 ☒ Credit any overpayments

**FEE CALCULATION**

**1. BASIC FILING, SEARCH, AND EXAMINATION FEES**

| Application Type | FILING FEES |                       | SEARCH FEES |                       | EXAMINATION FEES |                       | Fees Paid (\$) |
|------------------|-------------|-----------------------|-------------|-----------------------|------------------|-----------------------|----------------|
|                  | Fee (\$)    | Small Entity Fee (\$) | Fee (\$)    | Small Entity Fee (\$) | Fee (\$)         | Small Entity Fee (\$) |                |
| Utility          | 300         | 150                   | 500         | 250                   | 200              | 100                   |                |
| Design           | 200         | 100                   | 100         | 50                    | 130              | 65                    |                |
| Plant            | 200         | 100                   | 300         | 150                   | 160              | 80                    |                |
| Reissue          | 300         | 150                   | 500         | 250                   | 600              | 300                   |                |
| Provisional      | 200         | 100                   | 0           | 0                     | 0                | 0                     |                |

**2. EXCESS CLAIM FEES**

| Fee Description                                    | Small Entity |          |
|--|--------------|----------|
|  | Fee (\$)     | Fee (\$) |
| Each claim over 20 (including Reissues)            | 50           | 25       |
| Each independent claim over 3 (including Reissues) | 200          | 100      |
| Multiple dependent claims                          | 360          | 180      |

**Total Claims**      **Extra Claims**      **Fee (\$)**      **Fee Paid (\$)**      **Multiple Dependent Claims**

\_\_\_\_\_ - = \_\_\_\_\_ x \_\_\_\_\_ = \_\_\_\_\_      **Fee (\$)**      **Fee Paid (\$)**

**Indep. Claims**      **Extra Claims**      **Fee (\$)**      **Fee Paid (\$)**

\_\_\_\_\_ - = \_\_\_\_\_ x \_\_\_\_\_ = \_\_\_\_\_

**3. APPLICATION SIZE FEE**

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

**Total Sheets**      **Extra Sheets**      **Number of each additional 50 or fraction thereof**      **Fee (\$)**      **Fee Paid (\$)**

\_\_\_\_\_ - 100 = \_\_\_\_\_ /50 \_\_\_\_\_ (round up to a whole number) x \_\_\_\_\_ = \_\_\_\_\_

**4. OTHER FEE(S)**

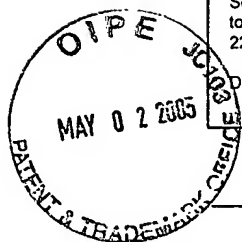
Non-English Specification, \$130 fee (no small entity discount)

Other (e.g., late filing surcharge): 2051 Surcharge-Late oath or declaration      **Fees Paid (\$)**      65.00

|                     |                         |                                   |                |
|---------------------|-------------------------|-----------------------------------|----------------|
| <b>SUBMITTED BY</b> |                         |                                   |                |
| Signature           |                         | Registration No. (Attorney/Agent) | 37,320         |
| Name (Print/Type)   | Cynthia L. Kanik, Ph.D. | Telephone                         | (617) 227-7400 |
|                     |                         | Date                              | May 2, 2005    |

I hereby certify that this correspondence is being deposited with the U.S. Postal Service as Express Mail, Airbill No. EV 466146545 US, in an envelope addressed to: MS Missing Parts, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on the date shown below.

Dated: May 2, 2005      Signature: (Cynthia L. Kanik, Ph.D.)



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Dated: May 2, 2005

Signature: 

(Cynthia L. Kanik, Ph.D.)

Docket No.: ATX-007CP4DV13CN  
(PATENT)

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

In re Patent Application of:  
John Joseph Harrington *et al.*

Application No.: 10/635818

Filed: August 5, 2003

For: COMPOSITIONS AND METHODS FOR NON-  
TARGETED ACTIVATION OF  
ENDOGENOUS GENES

Confirmation No.:

Art Unit: 1645

Examiner: Not Yet Assigned

**RESPONSE TO NOTICE TO FILE MISSING PARTS OF APPLICATION**

MS Missing Parts  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Dear Sir:

In response to the Notice to File Missing Parts of Application – Filing Date Granted mailed March 3, 2005, Applicant respectfully submits a copy of the Declaration filed in parent application 09/276820, a copy of the Revocation of Prior Powers of Attorney and Appointment of New Power of Attorney showing the current address for correspondence filed with the U.S. Patent and Trademark Office on August 15, 2003, and Part 2 Copy of Notice.

Applicant is also returning Part 3 Office Copy of Notice, which was inadvertently included in your March 3, 2005 mailing.

Application No.: 10/635818

Docket No.: ATX-007CP4DV13CN

Please charge our Deposit Account No. 12-0080 in the amount of \$65.00 covering the fee set forth in 37 CFR 1.16(f). The Director is hereby authorized to charge any deficiency in the fees filed, asserted to be filed or which should have been filed herewith (or with any paper hereafter filed in this application by this firm) to our Deposit Account No. 12-0080, under Order No. ATX-007CP4DV13CN. A duplicate copy of this paper is enclosed. Applicants request any extensions of time necessary to respond.

Dated: May 2, 2005

Respectfully submitted,

By 

Cynthia L. Kanik, Ph.D.

Registration No.: 37,320

LAHIVE & COCKFIELD, LLP

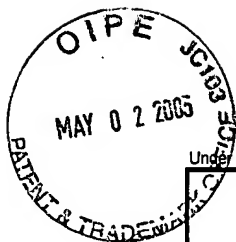
28 State Street

Boston, Massachusetts 02109

(617) 227-7400

(617) 742-4214 (Fax)

Attorney/Agent For Applicant



PTO/SB/21 (09-04)

Approved for use through 07/31/2006. OMB 0651-0031

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

# TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

|   |                        |                        |
|---|------------------------|------------------------|
| <b>TRANSMITTAL<br/>FORM</b><br><br>(to be used for all correspondence after initial filing) | Application Number     | 10/635818              |
|   | Filing Date            | August 5, 2003         |
|   | First Named Inventor   | John Joseph HARRINGTON |
|   | Art Unit               | 1645                   |
|   | Examiner Name          | Not Yet Assigned       |
| Total Number of Pages in This Submission  | Attorney Docket Number | ATX-007CP4DV13CN       |

## ENCLOSURES (Check all that apply)

|   |   |   |
|---|---|---|
| <input checked="" type="checkbox"/> Fee Transmittal Form                          | <input type="checkbox"/> Drawing(s)   | <input type="checkbox"/> After Allowance Communication to TC                            |
| <input type="checkbox"/> Fee Attached   | <input type="checkbox"/> Licensing-related Papers                                       | <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences     |
| <input type="checkbox"/> Amendment/Reply  | <input type="checkbox"/> Petition   | <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) |
| <input type="checkbox"/> After Final  | <input type="checkbox"/> Petition to Convert to a Provisional Application               | <input type="checkbox"/> Proprietary Information  |
| <input type="checkbox"/> Affidavits/declaration(s)                                | <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address | <input type="checkbox"/> Status Letter  |
| <input type="checkbox"/> Extension of Time Request                                | <input type="checkbox"/> Terminal Disclaimer  | <input checked="" type="checkbox"/> Other Enclosures:                                   |
| <input type="checkbox"/> Express Abandonment Request                              | <input type="checkbox"/> Request for Refund   | COPY of Declaration filed in 09/276820 (2 pages);                                       |
| <input type="checkbox"/> Information Disclosure Statement                         | <input type="checkbox"/> CD, Number of CD(s) _____                                      | COPY of Rev of Prior Powers of Atty and Appoint. of New Power of Atty (2 pgs);          |
| <input type="checkbox"/> Certified Copy of Priority Document(s)                   | <input type="checkbox"/> Landscape Table on CD  | Part 2 Copy of Notice (2 pages)   |
| <input checked="" type="checkbox"/> Reply to Missing Parts/Incomplete Application | Remarks   | Part 3 Office Copy of Notice (2 pages)  |
| <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53         |   | Return Receipt Postcard   |

## SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

|              |                         |          |        |
|--------------|-------------------------|----------|--------|
| Firm Name    | LAHIVE & COCKFIELD, LLP |          |        |
| Signature    |                         |          |        |
| Printed name | Cynthia L. Kanik, Ph.D. |          |        |
| Date         | May 2, 2005             | Reg. No. | 37,320 |

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Dated: May 2, 2005

Signature: (Cynthia L. Kanik, Ph.D.)